ATTENTION-Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION FOR Washington, D.C. 20549,

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Serial							
DATE RECE	EIVED							

OMB APPROVAL

OMB Number: 3235-0076

Estimated average burden

Expires: May 31, 2005

hours per form

	(□ check if this is		name has ch	nanged, and inc	dicate ch	ange.)			
SERIES C PRE	FERRED STOCK	FINANCING							
Filing Under (Che	ck-box(es) that appl	ly): \square Rule	504	□ Rule 505	X	Rule 506	☐ Section	n 4(6)	□ ULOE
Type of Filing:	☐ New Filing	☑ Amendment							
e de la companya de		A.	BASIC ID	ENTIFICATI	ON DA	ΓA			
1. Enter the infor	mation requested at	out the issuer							
Name of Issuer	(check if this is	an amendment and	name has ch	anged, and inc	dicate ch	ange.)			
Targeted Grown	th, Inc.								
Address of Execut	ive Offices	(Number	and Street, C	ity, State, Zip	Code)	Telephon	e Number (Incl	uding Are	a Code)
2815 Eastlake A	Avenue E., Suite 3	300, Seattle, WA	98102		1	(206) 33	6-5570		
Address of Princip	al Business Operati	ons (Number	and Street, C	ity, State, Zip	Code)	Telephon	e Number (Incl	uding Are	a Code)
(if different from l	Executive Offices)	•		•		•	`	Ū	•
Brief Description	of Business								
•							•		DOOCESSE
Research and o	levelopment in a	gricultural techno	ologies.					/	BROCFORE
Type of Business	Organization								MAR 05 2004
		☐ limited partners	ship, already	formed		□ o	ther (please spe	ecify):	MAIN OD FOO.
☐ business trust		☐ limited partners	ship, to be fo	rmed				,	THOMSON
<u> </u>				Month	. 7	'ear			FINANCIAL
Actual or Estimated	l Date of Incorporat	ion or Organization	:	0 5	9	8	□ Actual 🗵]	Estimated	
Jurisdiction of Inco	rporation or Organi	zation: (Enter two-l	letter U.S. Po	ostal Service al	bbreviati	on for Stat	e:		,
-	CN for	Canada; FN for oth	er foreign ju	risdiction)			W	A	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with When To File: the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each stafe where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice conditions apart of this notice and must be completed.

351949 03 1 of 8

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

· Each general and manag	ing partner of par	rtnership issuers.			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Green, Jonathan A.		,			
Business or Residence Addres	ss (Number and	Street, City, State, Zip Code)			
2815 Eastlake Avenue Ea	st, Suite 300, S	Seattle, WA 98102			
Check Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Todaro, George					
Business or Residence Addres	ss (Number and	Street, City, State, Zip Code)			
2815 Eastlake Avenue E	ast, Suite 300,	Seattle, WA 98102			•
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	⊠Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Joseph Regan					
	ss (Number and	Street, City, State, Zip Code)			
GrowthWorks WV Canad	ian Fund Inc	1600-250 Bloor Street Eas	t. Toronto, Ontario, Car	nada M4W-1E6	
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Todaro, Thomas					
Business or Residence Addres	s (Number and	Street, City, State, Zip Code)			
444 High Street, Suite 40	00, Palo Alto, C	A 94301			•
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Robert Barkley					
Business or Residence Addres	s (Number and	Street, City, State, Zip Code)			
c/o Targeted Growth, Inc	:., 2815 Eastlal	ke Avenue East, Suite 300,	Seattle, WA 98102		
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
Burnley, Christopher					
Business or Residence Addres	s (Number and	Street, City, State, Zip Code)			<u> </u>
c/o Targeted Growth Inc.	2815 Eastlak	e Avenue East, Suite 300,	Seattle, WA 98102		
Business or Residence Addres					
	(Use blan	sheet or conv and use additio	nal conies of this sheet, as r	necessary)	

•				
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Otten, Michael				
Business or Residence Address (Number an	d Street, City, State, Zip Code	e)		
c/o Targeted Growth, Inc., 2815 Eastla	iko Avonuo Fast. Suito 30	N Seattle WA 98102		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
	Donomona Owner	E DACOUNTO CINOCI	a birector	Managing Partner
Full Name (Last name first, if individual)				
Hellstrom, Drs. K.E. and I.	•	•		(· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Number an	d Street, City, State, Zip Code	;)		
3925 NE Surbar Drive, Seattle, WA 98	105			
Check Box(es) that Apply: ☐ Promoter	☑Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
				Managing Partner
Full Name (Last name first, if individual)				
J.T. International, L.L.C.		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Address (Number and	d Street, City, State, Zip Code)		
8360 Bridgeport Road, Suite 201, Rich	amond British Columbia	V6X-3C7 CANADA		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
	Deficited Owner	- Exceptive officer		Managing Partner
Full Name (Last name first, if individual)				
Fred Hutchinson Cancer Research Ce	enter	1		
Business or Residence Address (Number and	d Street, City, State, Zip Code)		
1100 Fairview Avenue N., C2M-027, Se	sattle WA 98109			
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
				Managing Partner
Full Name (Last name first, if individual)				
Roberts-Becker Family Fund; c/o Ann	e V. Farrell			
Business or Residence Address (Number and	d Street, City, State, Zip Code) .		
425 Pike Street, Suite 510, Seattle, WA	98101			
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
	·			Managing Partner
Full Name (Last name first, if individual)		•		
GrowthWorks WV Canadian Fund Inc.			<u> </u>	<u> </u>
Business or Residence Address (Number and	d Street, City, State, Zip Code)		
Attn: Joseph Regan, 1600-250 Bloor S	treet Fast Toronto Onta	rio Canada M4W-1F6		
	nk sheet, or copy and use addi		necessary.)	
10000	o. copj wile woo weel		 -	

A. Mak	B. INFORMATION ABOUT OFFERING		111111111111111111111111111111111111111
•		Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		\boxtimes
	Answer also in Appendix, Column 2, if filing under ULOE.		
2.	What is the minimum investment that will be accepted from any individual?	\$ <u>10,0</u>	00.00
3.	Does the offering permit joint ownership of a single unit?	Yes ⊠	No
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full	Name (Last name first, if individual)		
Lib	perty Pacific Securities, LLC		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
110	09 First Avenue, Suite 212, Seattle, Washington, 98101		
Name	e of Associated Broker or Dealer		
Sc	ott Craig		•
State	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		,
Ĺ	heck "All States" or check individual States) AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	☐ All 5	States
[]	IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[MO] [PA]	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.						
	•		Aggregate		Am	ount Alread
	Type of Security		ffering Pric		_	Sold
	Debt					
	Equity	\$	1,000,188	3	\$	924,879
	☐ Common ☑ Preferred* * Includes Series C Preferred Stock and Convertible Securities (including warrants)	Spec	ial Voting	Stoc	k \$	
	Partnership Interests					
•	Other (Specify)					
	Total					924,879
	Answer also in Appendix, Column 3, if filing under ULOE.	J	1,000,180	2		924,079
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		,		•	
			Number Investors		Do of	Aggregate Ilar Amount Purchases
	Accredited Investors			—	\$	
	Non-accredited Investors					
	Total (for filings under Rule 504 only)			_	\$	7.1.
	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Offering		Type of		Do	llar Arnount
			Security		Б0.	Sold
	Rule 505				\$	
	Regulation A			_	\$	
	Rule 504			-	\$	
	Total				\$	····
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees	•••••			\$	
	Printing and Engraving Costs-			X	\$	1,000
	Legal Fees			×	\$	90,000
	Accounting Fees			X	s_·_	10,000
	Engineering Fees				\$	
	Sales and Commissions (specify finders' fees separately)				\$	7,500
	Other Expenses (identify)				s	.,,,,,,,
						108,500
	10(a)	al			\$	100,000

		ATTENTION						1
Jona	than A. Green	President					<u></u>	
	of Signer (Print or Type)	Title of Signer (Print or Type)						
TAR	GETED GROWTH, INC.	1				FEB	2 4	200
Issuer	(Print or Type)	Signature			Date			
fallov	ring signature constitutes an undertaking by t	d by the undersigned duly authorized person. If ne issuer to furnish to the U.S. Securities and Exc o any non-accredited investor pursuant to paragrap	hang	e Commissio	on, upon v			
7		TO PROBLEM STORYS TO THE STORY	eri ş	at Su		The Control of the Co	- 16. L.	1,35
	Total Payments Listed (column totals added)			Œ	\$ <u>816</u>	.379		
	Column Totals			\$	⊏	\$		
				\$	_ =	\$		
	Other (specify):			\$		\$		
	Working capital			\$] \$ <u>8</u> :		
	• •		_	\$				
	that may be used in exchange for the assemerger)	the value of securities involved in this offering its or securities of another issuer pursuant to a		_	<u> </u>	_		~
	Construction or leasing of plant buildings an	d facilities		\$	[\$		_
	Purchase, rental or leasing and installation o	f machinery and equipment	_	\$				
	Purchase of real estate		_	\$		\$		_
	Salaries and fees		_	Payments Officers Directors Affiliate \$	s, , & es	C	ments t	0
5.	used for each of the purposes shown. If the estimate and check the box to the left of the	coss proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must set forth in response to Part C - Question 4.b						
	the "adjusted gross proceeds to the issuer."	nse to Part C - Question 4.a. This difference is				\$	<u>816,3</u>	<u>79</u>

1.	Is any party described in 17 CFR 230.262 presen of such rule?	•	Yes □	No IZI						
	See	Appendix, Column 5, for state resp	onse.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	suer has read this notification and knows the conte signed duly authorized person.	nts to be true and has duly caused th	nis notice to be signed on its behalf	by the						
	(Print or Type)	Signature	Date							
SSUCI	(Fint of Type)	Signature	Date	C	A 2004					
AR	SETED GROWTH, INC.	1	İ	FEB	2 4 2004					
lame	(Print or Type)	Title (Print or Type)								
lona	than A. Green	President		_						

Instruction:

Jonathan A. Green

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 5 Disqualificatio Type of security n and aggregate Intend to sell under State offering price to non-accredited Type of investor and ULOE investors in State offered in state amount purchased in State (if yes, attach (Part C-Item 2) (Part C-Item 1) (Part B-Item 1) explanation of waiver granted) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes Investors Investors No. Amount Amount Yes No ΑL ÀΚ Series C Preferred AZ \mathbf{X} 1 \$106,110.00 X \$1.06 per share AR

\$49,999.03

Series C Preferred

\$1.06 per share

X

CA

CO

CT

DE

DC

FL

GA

HI

ID.

IL

IN

ΙA

KS

KY LA

ME

MD

MA MI

MN

MS MO APPENDIX

X

1,	Inter	2 nd to sell	Type of security and aggregate			4			5 Disqualification under State ULOE		
	investo	-accredited ors in State B-Item 1)	offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT	103	X	Series C Preferred \$1.06 per share	1	\$50,000.09	Investors	Amount	103	X		
NE											
NV									,		
NH					-						
NJ		X	Series C Preferred \$1.06 per share	1	\$24,999.52		,		X ·		
NM						·					
NY		X	Series C Preferred \$1.06 per share	6	\$199,997.20				X		
NC											
ND			,								
ОН											
ОК											
OR											
PA											
RI								·			
SC											
SD											
TN				·			-				
TX											
UT											
VT											
VA											
WA		X	Series C Preferred at \$1.06 per share	12	\$493,654.46				X		
		х	Series C Special Voting Stock at \$0.0001 per share	1	\$188.49				X		
wv											
WI								<u>.</u>			
WY											
PR											